

KENTUCKY MEDICAID PHARMACY POS IMPLEMENTATION

PROVIDER UPDATE IMPLEMENTATION UPDATES

PROVIDER NOTICE 12.10.04 – 005

- Clinical Notes: Upon further communication with the provider community, systematic modifications have been made as follows:
 - Vitamins: legend and OTC vitamins will process as covered; note NDCs must be for rebatable products.
 - o **Prevacid™:** until further notice, Prevacid™ will process as covered.
 - o **Tylenol #3TM:** until further notice, ZyprexaTM will process as covered.
- Providers should resubmit claims for these products.
 - O GabapentinTM: Providers have asked about the coverage of this product: capsules are covered because they are A-rated, however the tablets are ZB-rated therefore not covered.
 - Additional modifications are being reviewed.
- **Prior Authorizations:** FH has supplemented Prior Authorization staff to work throughout the weekend to respond to PA fax requests that have been submitted this weekend.
- Reversals: Regarding claims that processed prior to December 4, 2004 and specifically claims that were processed with a 7-digit RX#: 7-digit numbers were truncated to store only the 2nd 7th positions. Consequently only a 6-digit RX# was passed to FH. When providers try to submit a reversal or a re-bill transaction for these historical claims, the reversal denies because it cannot find the original RX#. FH can manually reverse these claims for you as necessary. Additionally, FH and Unisys are working together on a systematic solution.
- **Personal Care recipients:** Providers may enter a "02" in the PATIENT LOCATION field to override copay for these recipients.
- **GROUP/ID:** Thank you for getting the word out—this is starting to look much better!

Technical Call Center 800-432-7005